STRATEGIES FOR REACHING YOUNG IDU'S PRESENTED BY TOBY CLARK-PICKENS

AUSTIN HARM REDUCTION COALITION

IV DRUG USE POSES THE LARGEST RISK FOR HCV, AND THE YOUNG IDU PRESENTS UNIQUE CHALLENGES IN TERMS OF HCV PREVENTION MESSAGING, TESTING, AND TREATMENT.

HCV "OUTBREAKS" FROM IV DRUG USE



- ➤ In 2007, a cluster of HCV cases was found in Buffalo and surrounding areas, due to Opana injection. These were primarily male, with a median age of 27.
- Massachusetts Department of Public Health notices an increase of HCV infection among people ages 15-24 from 2002-2009. These people were primarily white and living outside of metropolitan areas, who were IDU's.
- ➤ In 2010, Wisconsin Division of Public Health noted HCV infections increased in 6 rural areas in people under 30, all from IV drug use, primarily of prescription opioids.
- Alabama, Colorado, Ohio, Connecticut, Georgia, Indiana, Kentucky, Maine, Maryland, Montana, New Mexico, North Carolina, Oregon, Tennessee, Washington, and West Virginia have seen increases in HCV due to injection drug use.

SCOTT COUNTY, INDIANA

In the beginning of 2015, Scott County, Indiana began to have a huge increase in new HIV cases, now totaling 170 positive individuals. Opana injection is at the core of this outbreak. Many of these individuals are also co-infected with HCV. Pill injection presents a unique set of risks for disease transmission, making it riskier than injecting other drugs. The CDC warns that areas with HCV outbreaks due to syringe sharing could be at risk for similar HIV outbreaks.

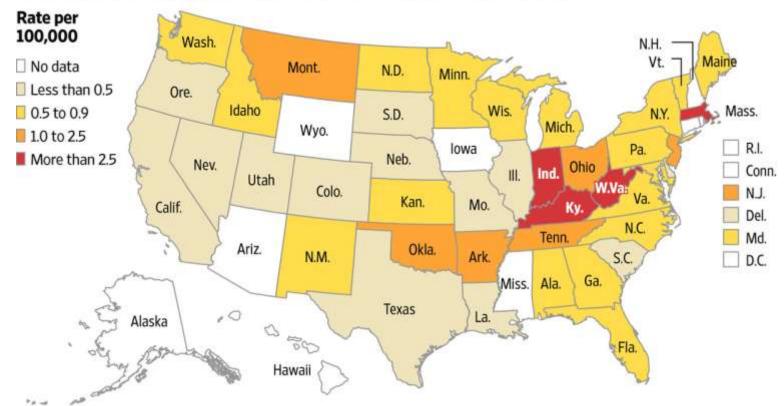


HCV RATES CONNECTED TO IV DRUG USE IN 2013

Scourge in the Heartland

Outbreaks of hepatitis C connected to injection-drug abuse have hit a swath of middle America, particularly Appalachia and Midwestern communities east of the Mississippi River. Public-health officials worry that many more cases have gone undetected.

New cases of hepatitis C reported in 2013 (2,138 nationwide)



RISK FACTORS FOR YOUNG IDU'S



Young IDU's are often less educated about HCV transmission due to several factors:

- Younger IDU's
- Incompetent injection skills
- Internet as a vehicle for education
- Pill injection: abuse deterrent issues, as well as clandestine activity by certain groups
- Heroin users are more likely to contract HCV
- Lack of knowledge of HCV and modes of transmission
- Homelessness

THE UFO STUDY

The UFO Study identified a very small window for HCV prevention among young injection users, as they noticed many of the young IDU's contracted HCV within the first few months of injection drug use.

How do we get the message to this vulnerable population that may not yet have come in contact with harm reduction

education?



SHAPING OUR MESSAGING TO FOCUS ON HCV



Unlike HIV, HCV is more concentrated, so it can replicate faster, and it is more stable outside the body so that it can live on surfaces for much longer. This is why it is vital to never share ANY injection equipment.

HCV can live on various surfaces for quite some time:

- Up to 63 days in the barrel of a syringe
- Up to 21 days in water in a plastic container
- Up to 14 days in an inanimate object, like a cooker
- Up to 24 hours in a cotton filter, and up to 48 hours if that cotton filter is stored in tin foil

PRESCRIPTION PILL ADDICTION IS A DRIVING FORCE



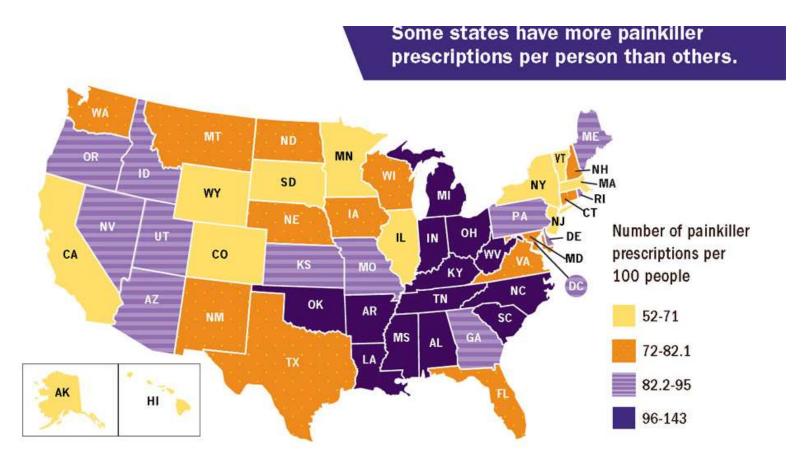
Prescription pill misuse drives the opiate addiction today.

Most users begin with oral consumption of prescription pills for 1-2 years before beginning to inject or transition to heroin.

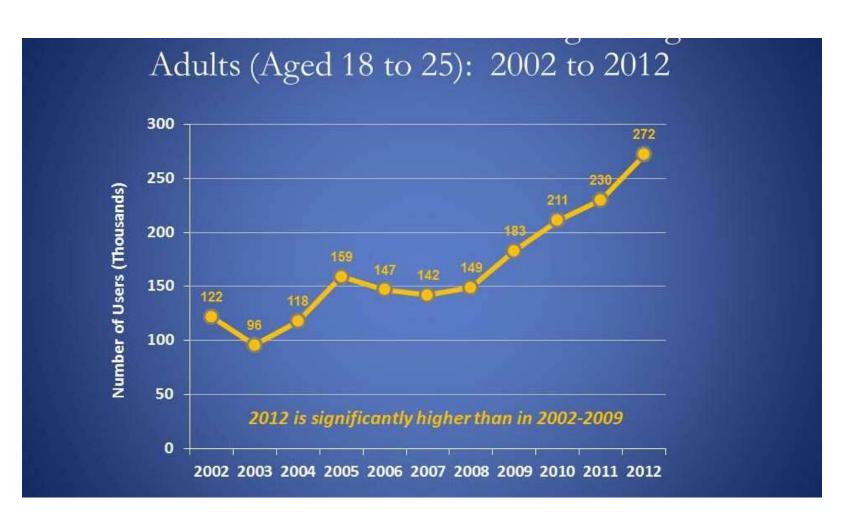
Most young people get prescription pills from family members or friends.



PAINKILLER PRESCRIPTIONS WRITTEN IN 2012



HEROIN USE HAS RISEN IN THE LAST DECADE



PRESCRIPTION PILL INJECTION HAS HIGHER RISK FOR HCV

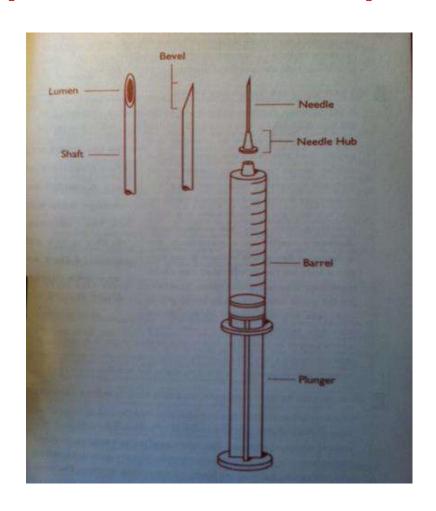
According to Jon Zibbell's study for the CDC, the prescription pill injector is 5 times more likely to get HCV compared to a heroin injector.

- Abuse-deterrent formulas require more manipulation to "break the gel," which leads to longer preparation times in which the drugs are exposed to more surfaces that could contain HCV.
- Additional water is needed to break abuse deterrents, which creates a "shot" that is too large for a single insulin syringe, which users have the most access to.
- In order to avoid doing multiple shots for a single fix, some users will use a 3mL syringe, with a detachable needle, which has a higher dead space that can hold more of the HCV virus, even when rinsed or bleached.
 - PLEASE remember bleach does NOT always kill HCV!
 - Because the 3mL syringe is harder to acquire, this equipment is more likely to be shared, posing a great risk of HCV transmission.

INSULIN SYRINGE WITH FIXED NEEDLE, LEAST DEAD SPACE



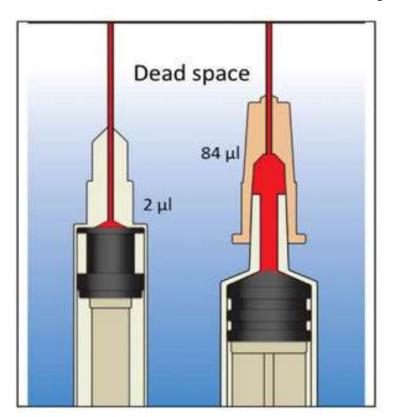
DETACHABLE NEEDLES (3ML SYRINGES)





DEAD SPACE

The space between the tip of the syringe (hub) and the needle itself is the "dead space," and can still contain solution after the needle is fully depressed.



THE PILL INJECTOR HAS LESS ACCESS TO HARM REDUCTION



The pill injector often "runs with a different crowd," and does not always come in contact with the IDU who may use the exchange.

- EDM, or Electronic Dance Music, or "Rave" crowd
- College crowd
- Live in rural area

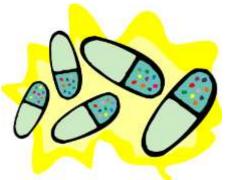
These injectors are more likely to inject secretly, as injection use has such stigma in both crowds. This clandestine use does not lend itself to peer education.



BRING THE PILL INJECTOR TO HARM REDUCTION

Pill injection comes with many risks, including the added risk of HCV, and it also requires specialized equipment to safely inject.

We believe that by giving the IDU what they want or need, they will come to us for services. The word of mouth among IDU's can be powerful, and when users hear we provide things like 3mL syringes and micron filters, they come searching for our services. Think out of the box!



RISKS OF PILL INJECTION



Prescription pills are made with fillers and binders, designed so that the medication makes it to the stomach or small intestine before it is broken down, so it can get into the bloodstream.

- These binders are created to withstand the deadly acidic nature of the digestive tract.
- You do NOT want to inject these tough ingredients, as they can cling to organs, causing damage, as well as being associated with serious vein damage.

COMPLICATIONS FROM INJECTING NON-ACTIVE INGREDIENTS IN PRESCRIPTION PILLS

- > Pulmonary Talcosis
- Vein Damage
- > Foreign Body Granulomatosis
- Damage to endothelial heart valves, risk of endocarditis
- Chronic inflammation of the lungs from binders being trapped in the pulmonary capillary beds
- ➤ Injection of Opana ER can cause a rare clotting disorder called thrombotic thrombocytopenic purpura (TTP)





- Micron filters, also called syringe filters and wheel filters, will filter out nearly all of the harmful ingredients of prescription pills.
- > These are very expensive and hard to acquire, so by providing these items, we can reach out to bring the pill injector into the fold of harm reduction.
- Once they come for filters and 3mL syringes, we have the opportunity to educate about the elevated risks of HCV with prescription pill injection.
- Meet them where they are, and give them micron filters!

WHAT DOES A MICRON FILTER LOOK LIKE?

- Micron filters are made with different filter materials. The PDVF filter is best for pill injection.
- Filters come in various sizes, with varied filters. For pill injection, the filter must be at least .2 microns, and the diameters preferred are 13 and 25mm.







NON-FILTERED SOLUTION VS. FILTERED SOLUTION









ubutex

Because each surface could pose a risk for disease or bacterial infection, it is vital to touch as few surfaces as possible, so backloading from one syringe to another is often used in the process. Backloading is when the solution from one syringe is put into another syringe, through the back end, with the plunger pulled out.



- 1) Take off the coating, but be sure not to get the pill wet, or it will "gel" from abuse-deterrents.
- 2) Crush to a fine powder. Some pills abuse deterrents make it hard to crush and you will need a file, hose clamp, Dremmel tool, or Pedi-Egg, but others can be crushed with a lighter under a piece of paper.







3) Manipulate your powder, as needed to break abuse-deterrents. For example, OxyContin is sometimes microwaved or baked to get a brown powder that won't "gel."

☞OxyContin after being cooked for preparation for injection.



4) Put the powder into a 10mL syringe and add 2-3mLs of water. Shake vigorously until the powder is dissolved.

5) Place a small clump of sterile cotton into the barrel of a 3mL syringe if the powder is very thick, with lots of residue.



6) Replace the plunger and push the cotton tight into the tip of the syringe barrel.



7) Screw the micron filter into the Luer Lock.



- 8) Backload the contents (your solution) of the 10mL syringe into the 3mL syringe with the cotton and micron filter.
- 9) Push the solution through the cotton and micron filter (or just the micron filter if the pill is rather water soluble), backloading it into another 3 mL syringe with your needle attached.
- 10) Inject or store in a bateriostatic solution.



BARRIERS TO HCV MESSAGING WITH YOUNG IDU'S

Acute infections are often asymptomatic, and young IDU's don't seek healthcare.

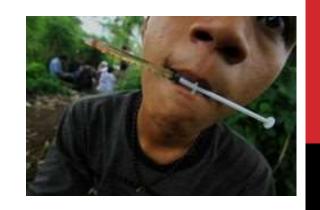
Testing Barriers

Time

- Transportation
- Fear of the outcome
- Stigma
- Lack of testing facilities



BARRIERS TO HCV MESSAGING WITH YOUNG IDU'S



Limited interest in HCV or drug treatment

Lack of HCV treatment in rural areas

Limited treatment options, especially MAT in rural areas

- MAT-Medication Assisted Treatment, Methadone and Suboxone
- MAT is a good vehicle for ongoing HCV prevention, because of longer treatment times, and harm reduction messaging and models.
- Stigma of drug use and HCV prevents some doctors from treating HCV in active users

TREATMENT AS PREVENTION MODEL



- ➢ It is estimated that 30-70% of all IDU's are HCV positive. Because so many go untested, some believe it is closer to 80%. In Austin, 80% of our clients are HCV positive.
- By treating all active drug users, the percentage of HCV positive IDU's would drastically drop, which would result in less infections. It is a simple numbers game!
- Barriers to treating active IDU's
 - Stigma
 - Belief the IDU will re-infect themselves by sharing syringes
 - Belief that IDU's cannot keep up with medicine regimen
- > All those beliefs about IDU's have been proven FALSE.

OVERCOMING BARRIERS FOR EFFECTIVE HCV MESSAGING WITH YOUNG IDU'S

- Meeting people where they are
- > "Give them what they want, and they will come."
 - Pill Injection Program at Austin Harm Reduction Coalition
 - Meth pipe distribution at People's Harm Reduction Alliance
 - Crack pipe distribution in Vancouver, Victoria, and other cities

PILL INJECTION PROGRAM AT AUSTIN HARM REDUCTION COALITION



The Pill Injector's Handbook:
A Guide to Safer Injection of Prescription Pills



Written by Toby Clark-Pickens Produced by Austin Harm Reduction Coalition

METH PIPE DISTRIBUTION AT PEOPLE'S HARM REDUCTION ALLIANCE



CRACK SMOKING KITS, FROM BRIDGEPORT, CT TO VANCOUVER



OVERCOMING BARRIERS FOR EFFECTIVE HCV MESSAGING FOR YOUNG IDU'S

"Speaking the language" of youth.

- Don't use "HCV," instead say "Hepatitis C" or "Hep C."
- Don't use IDU, but use "drug user" or "injection drug user."

Addressing social networks and their role in messaging.

Fostering community collaborations to expand testing, prevention, education, and outreach.

Using appropriate messaging for youth

 And appropriate vehicles for messages, such as You Tube and memes, as opposed to posters.

EMPOWERING THE DRUG USER TO SHARE HCV PREVENTION MESSAGES



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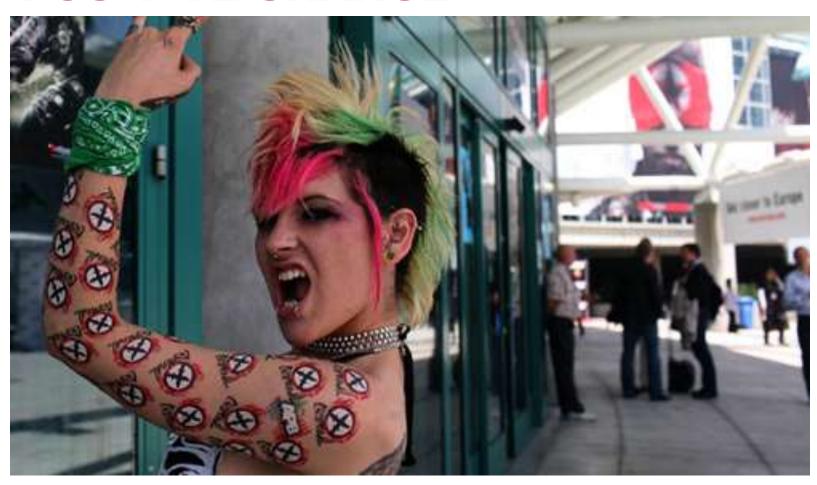
- Word of mouth is one of the most powerful tools we have to address young IDU's.
- Empowering someone can lead to any positive change, whether it is simply a dedication to sharing prevention messages, or to make a change in their using patterns.

> Empowering the drug user gives them dignity, respect, and motivation.





EMPOWERMENT OF THE IDU CREATES ANY POSITIVE CHANGE



THE POWER OF THE MEME

The definition of a meme is anything that spreads like a virus through word of mouth, blogs, social media, etc, but it has come to refer to the "flyers" we often see posted on social





UNDERSTANDING THE INTERNET'S ROLE IN MESSAGES ABOUT DRUGUSE

The Internet plays a huge role in messages about drug use and disease prevention. The messages on the Internet can be very accurate or very misleading.

- Facebook groups
- Bluelight
- Drugs Forum
- Reddit
- Drugs.com
- The Darknet
- You Tube

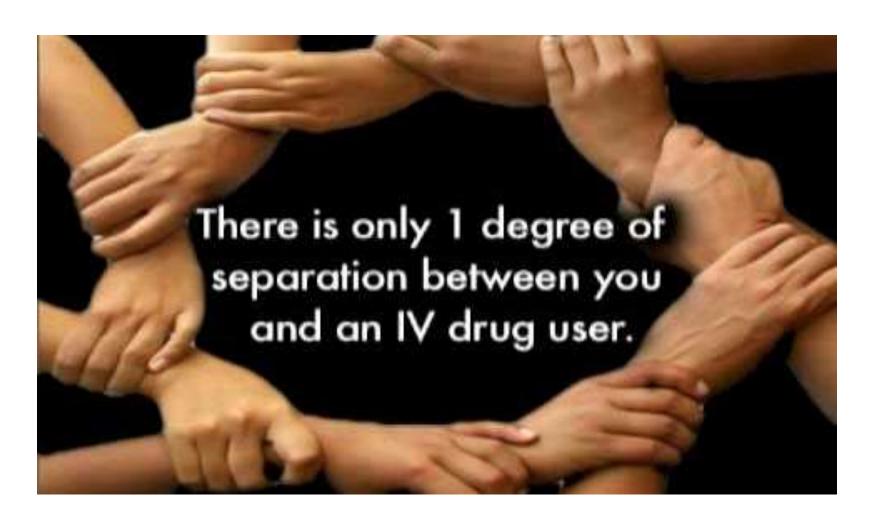








WE ARE ALL IN THIS TOGETHER!



AUSTIN HARM REDUCTION COALITION

The Austin Harm Reduction Coalition has been operating in Austin for more than 20 years, providing harm reduction education and supplies to IV drug users. We work tirelessly, mostly on a volunteer basis, to stop the spread of HIV and HCV. We strive to end the stigma and empower the drug user, by sharing information and spreading our knowledge with all who needs it.

Toby Clark-Pickens, Executive Director